



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 8217

Bib Data Sheet

SERIAL NUMBER 10/561,466	FILING OR 371(c) DATE 12/20/2005 RULE	CLASS 714	GROUP ART UNIT 2113	ATTORNEY DOCKET NO. NL 030755
------------------------------------	---------------------------------------------------------------	---------------------	-------------------------------	---------------------------------------------

APPLICANTS

Johannis Friso Rendert Blacquiere, Eindhoven, NETHERLANDS;
 Pope Ijtsma, Eindhoven, NETHERLANDS;
 Dirk Hamelinck, Eindhoven, NETHERLANDS;

MD

** CONTINUING DATA *****

This application is a 371 of PCT/IB04/50929 06/17/2004

MD

** FOREIGN APPLICATIONS *****

EUROPEAN PATENT OFFICE (EPO) 03101836.9 06/23/2003

MD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/27/2007

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance met Verified and Acknowledged	 Examiner's Signature	 Initials	STATE OR COUNTRY NETHERLANDS	SHEETS DRAWING 3	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------	--------------	--------------------------------------------	--------------------------------	-------------------------------	------------------------------------

ADDRESS

24737

TITLE

Device and method for recording information with remapping of logical addresses to physical addresses when defects occur

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
---------------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------